APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

No

Number of Copies of CRF::

Title::

AN ELECTRIC GRILL

Attorney Docket Number::

016660-181

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

1

Total Drawing Sheets::

2

Small Entity?::

No

Latin Name::

Variety Denomination Name::

Petition Included?::

No

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Hong Kong

Status::

Full Capacity

Given Name::

Wai Hing

Middle Name::

Family Name::

LAI

Name Suffix::

City of Residence::

Kowloon

State or Province of Residence::

Country of Residence::

Hong Kong

Street of Mailing Address::

Flat A, 2F., Block 7, Tak Chee Yuen, 88 Tat

Chee Avenue

City of Mailing Address::

Kowloon

State or Province of Mailing Address::

Country of Mailing Address::

Hong Kong

Postal or Zip Code of Mailing

Address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Hong Kong

Status::

Full Capacity

Given Name::

Wing Chung Joseph

Middle Name::

Family Name::

LAU

Name Suffix::

City of Residence::

Pokfulam

State or Province of Residence::

Country of Residence::

Hong Kong

Street of Mailing Address::

Flat 4325, 25/F., Block 43, Baguio Villa

City of Mailing Address	3::	Pokfulam			
State or Province of M	ailing Address::				
Country of Mailing Add	dress::	Hong Kong			
Postal or Zip Code of l	Mailing				
Address::					
Correspondence	Information				
Correspondence Customer Number::		21839			
Phone Number::		(703) 836-662	20		
Fax Number:		(703) 836-202	21		
	formation				
Representative In		21839			
Representative In Representative Custo		21839			
Representative Custo	omer Number::				
Representative Custo	omer Number::		Paren	ıt	Parent Filing
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Domestic Priority Application::	Information Continuit				
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Domestic Priority Application::	Information	ty Type::		cation::	Date::
Priority Priority Priority Priority	Information	ty Type::		cation::	Date::
Priority Priority Priority Priority	Information	ty Type::		cation::	Date::

Assignee Information

Assignee Name::

Eastern Sources Housewares (Hong Kong)

Limited

Street of Mailing Address::

Unit C, 14/F., Block A, Chung Mei Centre,

15-17 Hing Yip Street, Kwun Tong

City of Mailing Address::

Kowloon

State or Province of Mailing Address::

Country of Mailing Address::

Hong Kong

Postal or Zip Code of Mailing

Address::